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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name J55311

(1)

ADMIREALTY GROUP INC.

ANN NEALTY GROOT, INC.				
Principal Place of Business	Mailing Address		I santila billt billt annat tiret trant	tiåt midit årått billit mibit dibit mibit jän.
3100 GULF BLVD	3100 GULF BLVD			
#222	#222 Belleair Beach Fl	34634		To Cote at Leat Decord
BELLEAIR BEACH FL 34634 US	US		 Cate Incorporated or Qualified 02/04/1987 	3a. Date of Last Report 05/01/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		59-2766304	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Oity & State		6. Election Campaign Financing	\$5.00 May Be
3	28		Trust Fund Contribution	Added to Fees
Zip Country	Zφ	Country	8. This corporation has liability for in	intangible tax under s=199.032,
9. Name and Address of Currer	29		10. Name and Address of New R	
9. Name and Address or Currer	II Negistered Agent	81 Name		
ARN, CHARLES R.		B2 Street Add	iress (P.O. Box Number is Not Acceptab	ole)
3100 GULF BLVD				
#222		83		
BELLEAIR BEACH FL 34634		84 City		FL 85 Zip Code
 Pursuant to the provisions of Sections 607.0507 or registered agent, or both, in the State of Flori familiar with, and accept the obligations of, Sec 	tion 607.0505, Florida Statute	es		
or registered agent, or both, in the State of Fion familiar with, and accept the obligations of, Sec SIGNATURE Signature, these or protect cases of register that the control of the cont	garlandaga de d	(NC) is Registered Agent squature requi	ADDITIONS/CHANGES TO OFF	DATE TICERS AND DIRECTORS IN 12
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familiar with, and accept the obligations of, Sec SIGNATURE Signature: Signa	CARTED ASSET DATE OF THE STATE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of Floring familiar with, and accept the obligations of, Sec SIGNATURE Signature, types or protect cares of register days of the Conference of the C	OD DIRECTORS	13. 1.1 TILLE 1.2 NAME 1.3 SIREE LADDRESS 1.4 City-St-ZP	ADDITIONS/CHANGES TO OFF	TICERS AND DIRECTORS IN 12
or registered agent, or both, in the State of Florifamiliar with, and accept the obligations of, Sec SIGNATURE Signature, types or protect conveniences in Layou OFFICERS AN TITLE NAME ARN, CHARLES R. 3100 GULF BLVD #222 DELICATOR PEACH EL	CARTED ASSET DATE OF THE STATE	13. 1.1 TILE 12 NAME 1.3 SIREH ADDRESS 1.4 City - St - 2P 2.1 BLE	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12
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SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR MARIPS

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